

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004173

FILED  
May 02, 2006  
Secretary of State

**Entity Name:** NEW DAY 'N' CHRIST DELIVERANCE MINISTRIES, INC.

**Current Principal Place of Business:**

3055 NW 76TH ST  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

2959 NW 156TH ST  
MIAMI, FL 33054

**New Mailing Address:**

**FEI Number:** 65-0520033      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ROBERTS, AARON H SR  
2959 NW 156TH ST  
MIAMI, FL 33054      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROBERTS, AARON H SR  
Address: 2959 NW 156TH ST  
City-St-Zip: MIAMI, FL 330542225

Title: TR ( ) Delete  
Name: HALL, MARY P  
Address: 2440 NW 168TH ST  
City-St-Zip: MIAMI, FL 33056

Title: DT ( ) Delete  
Name: ROBERTS, ALICE M  
Address: 2959 NW 156TH ST  
City-St-Zip: MIAMI, FL 330542225

Title: TS ( ) Delete  
Name: TUCKER, DAVID W  
Address: 676 N.W. 46TH STREET  
City-St-Zip: MIAMI, FL 33127

Title: T ( ) Delete  
Name: BELL, CLEO  
Address: 2751 NW 174TH ST.  
City-St-Zip: MIAMI, FL 330564032

Title: TS ( ) Delete  
Name: GIPSON, DWIGHT L  
Address: 1480 NW 196TH TERRACE  
City-St-Zip: OPA LOCKA, FL 33056

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR (X) Change ( ) Addition  
Name: CARTER, ROSE A  
Address: 9928 N.W. LITTLE RIVER DR.  
City-St-Zip: MIAMI, FL 33147

Title: TS (X) Change ( ) Addition  
Name: ROBERTS, ALICE M  
Address: 2959 NW 156TH ST  
City-St-Zip: MIAMI, FL 330542225

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON ROBERTS, SR.

PRES

05/02/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date